

PARTICIPANT SIGN UP FORM – CAMP U CAN 2020
June 29, 2020 thru July 3, 2020

Student First Name: _____

Last Name: _____

Address: _____

City/State/Zip: _____

Date of Birth: _____ Age: _____

Phone: _____

Email: _____

Grade level into fall 2020: _____

Allergies: _____

Special Needs: _____

The name of the church that invited you: _____

By completing and submitting this form you agree that you, the parent/guardian, are giving permission to have the child that is in your care permission to participate in CAMP U CAN at Seneca Lake, Ohio June 29, 2020 - July 3, 2020. You also consent that all information is true and accurate to the best of your ability. If you, the volunteer, are completing this form with the permission of the parent/guardian then you acknowledge that you have the most accurate information that was provided to you and also that the parent/guardian is present during the completion of this form.

Signature of Parent/Guardian

Today's Date

***Please legibly sign this form ONLY if the form has been physically printed and will be manually submitted, thank you.**